## Arizona Board of Athletic Trainers

5060 N. 19th Ave., Suite 209 Phoenix, AZ 85015 Phone (602) 589-6337

Web Site: www.users.qwest.net/~azat Email: abote@mindspring.com

## **COMPLAINT FORM**

COMPLAINANT (Optional: if provided, this information may become public information)

Name	Telephone Number		
Mailing Address	City	State	Zip Code
FILED AGAINST Licensee	Busine	ess	Other
Name of Business or Individual		Licen	se Number
Address		Telephone Number	
Mailing Address	City	State	Zip Code
Have you discussed this complaint with the pe being filed ?	erson or business again	st whom this con	nplaint is Yes No
Describe in detail your complaint. Include all d have witnessed the complaint or are involved.	lates, times, locations a Please provide copies	nd any names of of any relevant d	individuals that may ocuments.